

# **Iowa Department of Human Services**

## **FY 2009 Child Welfare Strategic Plan**

### **[Date]**

## Vision, Mission and Guiding Principles

***Vision.*** Children grow up safe from abuse and with permanent family connections.

***Mission.*** To align DHS child welfare resources to achieve safety, permanency and well-being for the children and families we serve.

***Results.*** Iowa's child welfare system is focused on achieving the following results.

- Safety
  - Children are first and foremost, protected from abuse and neglect.
  - Children are safely maintained in their homes when possible and appropriate.
- Permanency
  - Children have permanency and stability in their living situations.
  - The continuity of family relationships and connections is preserved.
- Child and family well-being
  - Families have enhanced capacity to provide for children's needs.
  - Children receive services to meet their educational needs.
  - Children receive services to meet their physical and mental health needs.

### ***Guiding Principles***

- Customer focus. We listen to and address the needs of our customers in a respectful manner that builds upon their strengths. Our services promote meaningful connections to family and community.
- Excellence. We model excellence through efficient, effective, and responsible public services. We communicate openly and honestly, and adhere to the highest standards of ethics and professional conduct.
- Accountability. We maximize the use of resources and use data to evaluate performance and make informed decisions to improve results.
- Teamwork. We work collaboratively with customers, employees, and public and private partners to achieve results.

***Stakeholder Advisory Groups.*** The following stakeholder groups formally provide advise to DHS related to child welfare policy, practice and budget.

- Child Abuse Prevention Council
- Child Welfare Stakeholder Panel
- Child Welfare Advisory Committee

### DHS Role in the Child Welfare System

#### ***The child welfare system includes:***

- The formal public response to those children that come to the attention of DHS as the result of abuse/neglect, as well as
- A broader set of supports for vulnerable children and families that are at risk of abuse/neglect, but have not come to DHS' attention.

***DHS Role in Responding to Children & Families that come to DHS Attention as a result of abuse/neglect.*** DHS is responsible for providing the following child welfare services to those children and families in which child abuse has occurred and those at high risk for abuse and neglect. Our Child Welfare Model of Practice, adopted in December 2004, guides DHS services.

- DHS frontline child welfare staff are and will continue to be responsible for responding to reports of child abuse/neglect and for providing case management/oversight for those children and families most at risk of harm from child abuse/neglect and those children under the jurisdiction of the Juvenile Court.
  - DHS staff offer voluntary services and/or seek court jurisdiction for children with a founded report of child abuse with moderate to high risk of repeat maltreatment regardless of the child's age, and children with a founded report of child abuse with low risk of repeat maltreatment that are age 0 to 5.
- DHS collaborates with the Court system at the state and local level through the Children's Justice Initiative and other opportunities to improve outcomes for those children and families most at risk of harm from child abuse/neglect that need the protection of the Juvenile Court.
- DHS is responsible for developing an array of effective community based child welfare services and supports to address the protective and permanency needs of those children that come to the DHS attention, including the following services to:
  - Divert children and families from the formal child welfare system, including such things as Community Care and mediation
  - Assess the child and family's functioning, strengths and needs
  - Enable children to remain safely in their own homes
  - Provide safe out-of-home placements for children that cannot safely remain at home
  - Respond to emergencies
  - Enable children to return safely and permanently to live with their family in their own homes
  - Enable children to grow up in an alternative permanent family if they are not able to safely return home
  - Assist youth that turn age 18 while in foster care with the transition to young adulthood
- In developing child welfare services, DHS will focus on services and supports with the following characteristics.
  - Services strategies should be family centered, strength-based, individualized and reflect a "wraparound" approach.
  - Service intensity should be separate from service setting, so that intensive services are available regardless of where a child lives, and so that children do not have to change where they live when their service needs change.
  - All child welfare service contracts should be performance based, and reflect evidence-based practice.

- DHS is also responsible for collaborating internally and with other public agencies/organizations to ensure that children and families have access to the following types of services.
  - Services to address the parental issues that place their children at risk of harm from abuse/neglect, such as treatment for substance abuse, mental illness and domestic violence.
  - Services to address the well-being needs (including physical and mental health and education) of children for whom DHS has responsibility for placement and care.

***DHS Role in the Broader System of Care for Vulnerable Children & Families.*** DHS child welfare staff also have a role in the broader system of care for vulnerable children and families at the state and community level.

- DHS provides leadership at the state and local level in developing community based strategies to support families and prevent child abuse and neglect.
- DHS is a partner at the state and local level in helping communities develop a broader system of care for vulnerable children and families.
- DHS is a partner at the state and local level in helping communities become places where all children and families can achieve the following goals.
  - Children have access to caring adults. Families are secure and supportive.
  - Communities and schools are safe and supporting.
  - Youth have opportunities to engage in and contribute to the community.
  - Children have a healthy start and future. Youth are healthy and socially competent.
  - Youth are successful in school and prepared for a productive adulthood.
- DHS regulates community organizations that provide child welfare services (e.g., family foster care, group care, shelter, adoption) to vulnerable children and families.

### *Activities*

DHS has identified the following activities to improve child and family results and meet federal standards for systemic factors for implementation in SFY 2009. An “x” in the column means that the activity is intended to impact that outcome or systemic factor.

Note that this is a living document and the list of activities below is subject to change based on events that may impact priorities during the year. In addition, work plans are still being developed for the activities listed; as a result, activities are subject to change based on availability of resources.

Activity <sup>1</sup>	Outcomes <sup>2</sup>							Systemic Factors <sup>3</sup>						
	S1	S2	P1	P2	W1	W2	W3	IS	CR	QA	T	SA	AR	FP
1. Reprocure Community Care contract	X	X										X		
2. Work with Allen Memorial Hospital in Waterloo and St. Luke's in Cedar Rapids to establish a satellite Child Protection Center in Waterloo*	X													
3. Conduct review of child abuse intake policy and consistency of practice, in conjunction with Child Protection Council	X							X		X				
4. Work with National Resource Center on Child Maltreatment to review and refine DHS child protection policy, support for supervisors, safety and risk training and support for contractors, and to develop a communication plan on safety and risk.	X	X									X	X		
5. Work with University of Iowa School of Social Work to review and refine risk and safety assessment tools.	X	X						X						
6. Continue implementation work with Safety and Permanency contractors.	X	X		X				X				X		
7. Continue Safe Haven advertising	X		X											
8. Continue work with Judicial Department and Department of Public Health to improve services for families involved in the child welfare system where parental substance abuse is a factor, including:	X	X	X					X					X	

<sup>1</sup> Strategies that are asterisked reflect legislation passed in the 2008 General Assembly session. Strategies marked with 2 asterisks reflect federal mandates.

<sup>2</sup> S1 = Children are, first and foremost, protected from abuse and neglect. S2 = Children are safely maintained in their homes whenever possible and appropriate. P1 = Children have permanency and stability in their living situations. P2 = The continuity of family relationships and connections is preserved for children. W1 = Families have enhanced capacity to provide for their children's needs. W2 = Educational needs of children are identified and addressed. W3 = Children receive adequate services to meet their physical and mental health needs.

<sup>3</sup> IS = Statewide information system. CR = Case review system. QA = Quality assurance system. T = Training. SA = Service array. AR = Agency responsiveness to the community. FP = Foster and adoptive parent licensing, recruitment and retention.

Activity <sup>1</sup>	Outcomes <sup>2</sup>							Systemic Factors <sup>3</sup>						
	S1	S2	P1	P2	W1	W2	W3	IS	CR	QA	T	SA	AR	FP
<ul style="list-style-type: none"> <li>Implement federal substance abuse/child welfare Parents and Children Together grant to develop drug courts and community based services</li> <li>Intensive technical assistance from National Resource Center on Substance Abuse and Child Welfare</li> <li>Implement HF 2310 to improve data collection, to develop protocols for serving families involved in both system, and to address any disincentives to parents seeking substance abuse treatment; provide report to General Assembly (GA)*</li> <li>Implementing language in SF 2425 to review processes for drug testing persons responsible for the care of a child in child abuse cases; and submit report to GA.*</li> </ul>														
9. Make revisions to drug testing contract and web site.		X						X						
10. Continue to provide support to Community Partnership for Protecting Children sites to deepen implementation of 4 core strategies, and work to expand to 1 remaining county.		X											X	
11. Continue to implement Parent Partners in CPPC sites		X	X									X		
12. Work with Child Support Services Unit (CSRU) to train staff on how to use the Parent Locator and available public resources to locate parents and other families members that can provide support and permanency for children in foster care				X										
13. Analyze Family Finding report, share information with staff and stakeholders, determine recommendations that can be implemented within existing resources and develop plan to implement			X	X										
14. Revise manual to reflect legislative change related to out-of-state involuntary terminations of parental rights (TPR)*			X											
15. Strengthen consistency and accuracy of adoption subsidy determinations and negotiations			X											
16. Meet monthly with DOM and LSA to discuss adoption subsidy projections*			X											
17. Continue implementation and begin evaluation of IV-E subsidized guardianship waiver			X											
18. Develop and implement format for documenting achievement of			X											

Activity <sup>1</sup>	Outcomes <sup>2</sup>							Systemic Factors <sup>3</sup>						
	S1	S2	P1	P2	W1	W2	W3	IS	CR	QA	T	SA	AR	FP
permanency goal of another planned permanent living arrangement (APPLA).														
19. Continue to implement and expand Transitioning Youth Initiative in CPPC sites, including Iowa Youth Dream Team training and implementation.			X											
20. Work with Department of Public Health and Social Security Administration to provide youth exiting care to young adulthood access to birth certificate and social security number*			X											
21. Develop policy and procedure to ensure that, if a child remains in foster care until the age of majority, the child receives prior to discharge the most recent information available regarding the child's health and educational records*.						X	X							
22. Revise job description for Transition specialists to provide more consistency across Service Areas			X											
23. Participate in Judicial Department Children's Justice State Team, and in Judicial District teams.			X	X	X	X	X		X					
24. Provide information to staff and stakeholder about Memorandum of Agreement with Sac and Fox; and work with tribe to implement provisions related to child welfare funding				X				X						
25. Work with Judicial Department to complete federally required study of ICPC**				X										
26. Implement elements of plan to strengthen engagement of fathers in child welfare cases (e.g., adding info to transition planning, exploring how to create more family-friendly offices, incorporating into training for staff at all levels, collaboration with Judicial Department and Child Advocacy Board, collaboration with Empowerment)					X				X		X			
27. Enhance technology supports for workers and provide training on quality visits in order to increase the quantity and quality of worker visits with children in foster care.					X			X			X			
28. Work with Department of Education to increase % of CAPTA and foster care referrals that participate in Early Access services						X	X	X						
29. Participate in Children's Justice Initiative workgroup to close the educational achievement gap for children in foster care						X								

Activity <sup>1</sup>	Outcomes <sup>2</sup>							Systemic Factors <sup>3</sup>						
	S1	S2	P1	P2	W1	W2	W3	IS	CR	QA	T	SA	AR	FP
<ul style="list-style-type: none"> <li>Develop and implement form for birth parent(s) to allow foster parents to consent to school trips and other activities</li> <li>Provide guidance on role of parent/foster parent with respect to special education</li> <li>Develop policy and practice for consistent education assessment when child enters foster care, as well as services to address gaps</li> <li>Explore expansion of McKinney Vento protections to children in foster care</li> <li>Use DOE credit and component recovery and transcript interpretation</li> </ul>														
30. Analyze use of psychotropic medications for children in foster care							X							
31. Implement improvements in SACWIS, as well as other technology tools, to address federal requirements, make system more user friendly for staff, and enhance data reporting								X						
32. Continue to work with Children's Justice Advisory Committee work group on court data measures.								X						
33. Develop plan for implementing the National Youth Transition Data Base over the next 2 years**								X						
34. Incorporate CFSR standards into manual whenever possible										X				
35. Automate CFSR case reading tool								X		X				
36. Implement child welfare data warehouse								X						
37. Complete fund source hierarchy project								X						
38. Implement new budget monitoring system								X						
39. Work with Judicial Department to automate process for sharing information with court administrators so that courts can issue timely notice to foster and adoptive parents**.								X	X					
40. Work with Child Advocacy Board to implement legislation allowing foster care review pilots that enhance support for CFSR outcomes*.									X	X				
41. Implement "mini-CFSR's" and share findings with stakeholders										X			X	
Complete new 5-year Title IV-B Child and Family Service Plan**.													X	
42. Develop and provide regular reports on child and family services, including profile of children served, CFSR outcomes and contractor performance measures to share with DHS staff and stakeholders										X			X	



Activity <sup>1</sup>	Outcomes <sup>2</sup>							Systemic Factors <sup>3</sup>						
	S1	S2	P1	P2	W1	W2	W3	IS	CR	QA	T	SA	AR	FP
43. Continue to publish Child Welfare Practice Bulletins on a regular basis										X				
44. Provide training to public and private child welfare staff and supervisors to achieve a knowledgeable skilled workforce, including working with Coalition and other providers to develop and implement new funding (\$250,000) for provider training*											X			
45. Provide training for staff on family foster care difficulty of care rate setting											X			X
46. Explore Motivational Interviewing as an evidence-based process for engaging families in change process.											X			
47. Continue to work with Children's Justice Advisory Committee on court-DHS training											X			
48. Implement workforce recruitment and retention grant with University of Iowa (U of I) and Safety/Permanency contractors if U of I receives grant.											X	X		
49. Work with shelters and other stakeholders to implement changes in shelter care contracts and development of emergency child welfare services*								X				X		
50. Develop options for providing a growth mechanism for reimbursement of providers funded under Child and Family Services appropriation*												X		
51. Work with highly structured treatment program (HSTP) providers to eliminate separate designation as HSTP programs *								X				X		
52. Include language regarding provider disaster plans in provider contracts, and provide technical assistance and training												X		
53. Amend contract with Elevate to reflect additional activities and increased funding*													X	
54. Finalize and implement revised licensing/approval standards for foster and adoptive homes, as well as unlicensed kinship providers														X
55. Continue to work with KidsNet to resolve data issues, implement recruitment plans, and ensure that children in foster care are placed close to home and that siblings are placed together								X						X
56. Issue RFP for foster and adoptive parent association														X

**Child Welfare Strategic Plan  
Performance Measures<sup>4</sup>**

Outcome	Performance Measures	Data Source	
		Child Welfare Information System (CWIS)	Case Reading/Mini-CFSR
Safety 1. Children are, first and foremost, protected from abuse and neglect	Initiate of investigations of reports of child maltreatment are timely		X
	Children that are maltreated do not experience repeat maltreatment	X	X
	Incidence of child abuse and/or neglect of children in foster care	X	
Safety 2. Children are safely maintained in their homes whenever possible and appropriate	Services are provided to protect children in the home and prevent removal		X
	Risk and safety concerns are assessed and addressed		X
Permanency 1. Children have permanency and stability in their living arrangements	Children do no re-enter foster care	X	X
	Children are in stable placements	X	X
	Permanency goals are appropriate and timely		X
	Permanency goals of reunification, guardianship, or permanent placement with relatives are achieved timely	X	X
	Permanency goals of finalized adoption are achieved timely	X	X
	Permanency goals of another planned permanent living arrangement are achieved timely.		X

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Outcome	Performance Measures	Data Source	
		Child Welfare Information System (CWIS)	Case Reading/Mini-CFSR
Permanency 2. The continuity of family relationships and connections is preserved for children	Children in foster care are placed in close proximity to their parents		X
	Children in foster care are placed with their siblings		X
	Children in foster care have frequent visits with parents and siblings		X
	Children in foster care maintain connections to their community, faith, extended family, tribe, school, and friends		X
	Children in foster care are placed with relatives whenever possible		X
	Positive relationships between children in care and their parents are encouraged and supported		X
Well-Being Outcome 1. Families have enhanced capacity to provide for their children's needs	The needs of children, their parents, and foster parents are assessed and addressed		X
	Children and their parents are involved in the case planning process on an on-going basis		X
	Case workers visit children regularly to promote achievement of goals		X
	Case workers visit parents regularly to promote achievement of goals		X
Well-Being 2. Children receive appropriate services to meet their educational needs	Educational needs of children are identified and addressed		X
Well-Being 3. Children receive adequate services to meet their physical and mental health needs	Physical health need of children are addressed		X
	Mental and behavioral health needs of children are addressed		X

### Parking Lot

The following items reflect strategies that DHS has identified as important for improving safety, permanency and well-being outcomes, as well as strengthening Iowa's child welfare system. However, for a variety of reasons listed below, we have determined that we will not be devoting resources towards these items in SFY 2009.

<b>Strategy<sup>5</sup></b>	<b>Reason not being implemented in SFY 2009</b>
1. Implementation of PS-MAPP for relatives	Funding was eliminated from SFY 2008 budget and is not included in SFY 2009 budget
2. Strengthen supports for non-licensed relative placements	No funding is provided in SFY 2009 budget
3. Continued implementation and/or expansion of Family Finding to improve permanency for youth in care	Initial pilot was funded with one-time-only funding, and there is not funding in SFY 2009 budget to either continue or expand
4. Improve process for transferring medical information, including records, when children enter foster care or change foster care placements*	Lack of staff resources, given other strategies being worked on
5. Strengthen quality assurance for family team meetings to ensure consistent quality family engagement	Lack of funding or staff resources, given other strategies being worked on
6. Engage external stakeholders/community partners in child welfare quality assurance and improvement system	Lack of staff resources, given other strategies being worked on
7. Group care performance based RFP	To enable both DHS and providers to devote staff time and resources to more fully adjust to the prior changes in service array and contracting, before making another change towards performance based contracting
8. Full implementation of dual licensure	To enable both DHS and providers to devote staff time and resources to more fully adjust to the earlier changes in resource family recruitment, training and support contract
9. Revise manual to strengthen policy and procedures on concurrent planning*	Lack of staff resources, given other strategies being worked on
10. Work with parents and other stakeholders to revise case plan format to be more "family friendly"	Lack of staff resources, given other strategies being worked on
11. Expand policy and procedure in manual to strengthen engagement of	Lack of staff resources, given other strategies being worked on

<sup>5</sup> Items marked with an asterisked will be added to the FY 2009 Strategic/Action Plan if staff resources become available.

fathers in child welfare cases*	
12. Explore electronic access cards for foster and adoptive parents	Limited staff and other resources, need to complete and evaluate statewide roll-out of electronic deposit before pursuing

## **Accomplishments**

### FY 2008

- Published manual in revised format
- Implemented new supervisory training curriculum, including curriculum specifically directed at youth transitioning from foster care to young adulthood
- Implemented Iowa All Opportunity Foster Care Youth college grants
- Partnered with Judicial Department and Department of Public Health, and awarded federal grant for Parents and Children Together (PACT) drug court and community treatment model for families involved with the child welfare system where substance abuse is an issue; as well as in-depth technical assistance from the National Resource Center for Substance Abuse and Child Welfare.
- 98 counties now participating in Community Partnerships for Protecting Children (CPPC)
- Piloted Parents as Partners in 4 Community Partnership for Protecting Children (CPPC) sites, in order to improve family reunification
- Began roll-out of Jim Casey Youth Opportunity to 3 CPPC sites, in order to strengthen foster care youth transition to young adulthood and implemented Iowa Youth Dream Team (youth centered planning approach for transitioning youth)
- Completed 4 reports to the Legislature – alternatives to Toledo for male youth adjudicated CINA, highly structured treatment programs, group care waiting list and responsible fatherhood
- Implemented Title IV-E subsidized guardianship waiver to improve permanency for children
- Piloted Family Finding project in Ames and Dubuque to increase permanency for older youth
- Strengthened policy and practice and trained staff related to safety assessment and safety planning
- Implemented contract for statewide drug testing contract
- Implemented contract for Safety Plan services and Family Safety, Risk and Permanency Services
- Significantly increased percentage of children having monthly visits from their DHS caseworker
- Began implementing “mini-CFSR’s” in selected counties
- Sponsored Moms Off Meth Conference

### FY 2007

- Successfully completed Child and Family Service Review (CFSR) Program Improvement Plan (PIP)
- 97 counties now participating in Community Partnerships for Protecting Children (CPPC)
- Developed Child Welfare Stakeholder Panel, co-chaired by representative of Judicial Department and DHS Division of Child and Family Services
- Approved for Subsidized guardianship waiver, implemented 2-1-07
- Successfully delinked child welfare and Medicaid funded remedial services
- Implemented PAL and MIYA

- Implemented Family Finding and Connections Pilot Project in Ames and Dubuque Service Area
- Published Child Welfare Data Dashboard on DHS website
- Awarded federal grant for supervisory training curriculum focused on youth transitioning from foster care
- Implemented contract for Resource Family Recruitment and Retention
- Released RFP for statewide drug testing contract
- Released RFP for Safety Plan services and Family Safety, Risk and Permanency Services
- Contracted with Elevate to strengthen voice and leadership of former and current foster care youth
- Initiated CFSR related case reading by supervisors

### Child Welfare Services – Service Business Team

DHS has established a Service Business Team to guide the collaboration and partnership between Central Office and Service Area in achieving the goals of the Child Welfare Strategic Plan. The Service Business Team is responsible for developing and monitoring the Child Welfare Strategic plan.

The Service Business Team includes the following members.

- Vern Armstrong, Chief of the Bureau of Protective Services
- Gary Hoxmeier, Supervisor of the Field Operations Support Unit
- Evan Klenk, Waterloo Service Area Manager
- Mary Nelson, Administrator of the Division of Child and Family Services

The Service Business Team has chartered 6 Task Teams that are responsible for aspects of the Child Welfare Strategic Plan. Teams are co-led by a staff person from Central Office (either the Division of Child and Family Services [DCFS] or the Division of Field Operations [DFO]) and by a representative of the Service Areas. External stakeholders are invited to work on specific activities as appropriate.

- Safety, led by Rosemary Norlin (CFS) and Mike McInroy (Des Moines Service Area)
- Permanency, led by Brenda McClure (FOSU) and Roxanne Thompson (Ames Service Area)
- Service Array and Agency Responsiveness, led by Trish Barto (CFS) and Pat Anderson (Sioux City Service Area)
- Case Review, led by Audrey Dunn (FOSU) and Holly Karr-White (Linn County Service Area)
- Statewide Information System, Quality Assurance, and Training, led by Margie Poorman (FOSU) and Carol Gutchewsky (Council Bluffs Service Area)
- Foster and Adoptive Parent Recruitment and Licensing, led by Gerry Prine (CFS) and Jan Pratt (Waterloo Service Area)